

Do not mail. Taxpayer information copy.

Item changed	
← <input type="checkbox"/> <input type="checkbox"/> →	Your Social Security Number
← <input type="checkbox"/> <input type="checkbox"/> →	Spouse's Social Security Number
← <input type="checkbox"/>	
← <input type="checkbox"/>	

Dependents:

Taxpayer Copy

Original
amount or
as previously
adjusted

Net change
amount or
increase or
(decrease)

Correct
amount

7	FEDERAL ADJUSTED GROSS INCOME.....			
8	LESS FEDERAL INCOME TAX.....			
9	YOUR LOUISIANA TAX TABLE INCOME.....			
10	YOUR LOUISIANA INCOME TAX.....			
11	FEDERAL CHILD CARE CREDIT.....			
NONREFUNDABLE TAX CREDITS				
11A	OTHER NONREFUNDABLE TAX CREDITS			
11B	AMOUNT OF NONREFUNDABLE LOUISIANA CHILD CARE CREDIT CARRIED FROM PREVIOUS YEARS.			
11C	2005 NONREFUNDABLE LOUISIANA CHILD CARE CREDIT			
11D	TOTAL NONREFUNDABLE TAX CREDITS			
12	ADJUSTED LOUISIANA INCOME TAX			
13	CONSUMER USE TAX			
14	TOTAL INCOME TAX AND CONSUMER USE			
REFUNDABLE CREDITS AND PAYMENTS				
15A	2005 REFUNDABLE LOUISIANA CHILD CARE CREDIT			
15B	OTHER REFUNDABLE CREDITS			
15C	AMOUNT OF TAX WITHHELD FOR 2005			
15D	AMOUNT OF CREDIT CARRIED FORWARD FROM 2004.....			
15E	AMOUNT PAID ON YOUR BEHALF BY A COMPOSITE PARTNERSHIP FILING.....			

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15F	AMOUNT OF ESTIMATED PAYMENTS FOR 2005			
15G	AMOUNT PAID WITH EXTENSION REQUEST			
15H	TOTAL REFUNDABLE CREDITS AND PAYMENTS.....			
16	OVERPAYMENT			
17A	AMOUNT OF LINE 16 CONTRIBUTED TO MILITARY FAMILY ASST. FUND			
17B	AMOUNT OF LINE 16 YOU WISH TO DONATE			
17C	AMOUNT OF LINE 16 YOU WISH TO CONTRIBUTE TO START PROGRAM.....			
17D	AMOUNT OF LINE 16 TO BE CREDITED TO 2006 INCOME TAX			
18	SUBTOTAL – ADD LINES 17A THROUGH 17D			
19	AMOUNT OF LINE 16 TO BE REFUNDED TO YOU			
20	AMOUNT YOU OWE			
21	ADDITIONAL DONATION TO THE MILITARY FAMILY ASSISTANCE FUND			
22	INTEREST			
23	DELINQUENT FILING PENALTY			
24	DELINQUENT PAYMENT PENALTY.....			
25	UNDERPAYMENT PENALTY			
26	BALANCE DUE LOUISIANA			